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Bib Data Sheet

CONFIRMATION NO. 3343

SERIAL NUMBER 10/007,461	FILING OR 371(c) DATE 11/05/2001 RULE	CLASS 709	GROUP ART UNIT 2154	ATTORNEY DOCKET NO. 109140-0005U
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APPLICANTS

Rick Castanho, Nashua, NH;
 Jeffrey Delaney, Hudson, NH;
 William Harry Kirtley, Arlington, MA;
 Robert Kuszewski, Arlington, MA;
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 David A. Page, Manchester, MA;
 Gregory Charles Warden, Belmont, MA;

**** CONTINUING DATA *******

This appln claims benefit of 60/246,140 11/06/2000

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****

** 01/08/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NH	SHEETS DRAWING 2	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

00207

TITLE

System and method for service specific notification

FILING FEE RECEIVED 424	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/246,140 11/06/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 01/08/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY NH	SHEETS DRAWING 2	TOTAL CLAIMS 26
INDEPENDENT CLAIMS 2				
ADDRESS 24267				
TITLE System and method for service specific notification				
FILING FEE RECEIVED 424	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	